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Total Number of Pages in This Submission: **20**

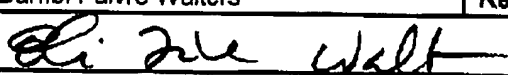
| | |
|------------------------|---------------------|
| Application Number | 10/806,870 |
| Filing Date | March 23, 2004 |
| First Named Inventor | Paul Rivers |
| Art Unit | 3637 |
| Examiner Name | C.T. Cajilig |
| Attorney Docket Number | 04-BS001 (BS030749) |

ENCLOSURES

(Check all that apply)


| | | |
|---|---|--|
| <input checked="" type="checkbox"/> Fee Transmittal Form <input checked="" type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input checked="" type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53 | <input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) | <input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input type="checkbox"/> Other Enclosure(s) (please identify below): |
| Remarks: This Response and Request for Extension of Time is filed in response to the Office Action mailed on July 12, 2006. Please contact Bambi Walters at 757-253-5729 if there are any problems with the transmission. | | |

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

| | | | |
|-------------------|--|-----------|--------|
| Name (Print/Type) | Bambi Faivre Walters | Reg. No.: | 45,197 |
| Signature |  | | |
| Date | January 11, 2007 | | |

CERTIFICATE OF TRANSMISSION / MAILING

I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner For Patents, PO Box 1450, Alexandria, VA 22313-1450 on the date shown below.

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|-------------------|--|------|------------------|
| Name (Print/Type) | Bambi Faivre Walters | Date | January 11, 2007 |
| Signature |  | | |